STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	155771	A. BUILDING 01 B. WING _____	12/07/2012

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FRANKLIN UNITED METHODIST COMMUNITY	1070 W JEFFERSON ST FRANKLIN, IN 46131

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
K 000	INITIAL COMMENTS A Life Safety Code Recertification and State Licensure Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.70(a). Survey Date: 12/07/12 Facility Number: 001127 Provider Number: 155771 AIM Number: 200247220 Surveyor: Phillip Komsiski, Life Safety Code Specialist At this Life Safety Code survey, Franklin United Methodist Community was found in compliance with Requirements for Participation in Medicare/Medicaid, 42 CFR Subpart 483.70(a), Life Safety from Fire and the 2000 edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 19, Existing Health Care Occupancies and 410 IAC 16.2. The Franklin United Methodist Community consists of four separate, connected buildings constructed at four different times. Building # 1 an NCC facility built in 1957, is a three story sprinklered building of Type I (332) construction with a basement. Building # 2 built in 1980 is a three story, sprinklered building of Type I (332) construction with a basement. Building # 3 built in 1992 is a one story, sprinklered building of Type I (332) construction with a basement. Building # 4 built in 2000 is a three story, sprinklered building of Type I (332) construction. Because all buildings are the same type of construction, the facility was surveyed as one	K 000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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K 000	Continued From page 1 building. The facility has a fire alarm system with smoke detection in the corridors and spaces open to the corridors. In building # 2, 47 battery operated smoke detectors were provided in the resident rooms on Health Center 2 and Health Center 3. In building # 3 and # 4, 72 hard wired smoke detectors were installed in resident rooms on the Murphy Special Care West unit, Advanced Special Care Unit, Rehab 1 and Rehab 3. The healthcare portion of the facility has a capacity of 208 and had a census of 172 at the time of this survey. All areas where the residents have customary access were sprinklered and all areas providing facility services were sprinklered. Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 12/14/12.	K 000		